



#11

PATENT

Attorney Docket No.: A-62629/RFT/RMS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:)	Examiner: D. Jones
)	
Kayyem et al.)	Group Art Unit: 1211
)	
Serial No. 08/541,191)	
)	
Filed: October 11, 1995)	
)	
For: CELL-SPECIFIC GENE)	
<u>DELIVERY VEHICLES</u>)	

NOV 24 1997

CERTIFICATE OF MAILING

I hereby certify that this correspondence, including listed enclosures, is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Assistant Commissioner of Patents, Washington, DC 20231 on 10 November 1997.

Signed: Glory L. Tabuena
Glory L. Tabuena

AMENDMENT

Assistant Commissioner of Patents
Washington, DC 20231

Sir:

This amendment is in response to the Office Action dated July 7, 1997 (Paper No. 9). The amendment is accompanied by a petition for a one month extension and the required fee, making this a timely response.

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AF/GP/211 \$
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

KAYYEM, et al.

Serial No. 08/541,191

Filed: October 11, 1995

For: CELL-SPECIFIC GENE DELIVERY VEHICLES



Group Art Unit: 1211

Examiner: D. Jones

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Signed: _____

Glory L. Tabuena

Assistant Commissioner for Patents
BOX AF
Washington, DC 20231

Sir:

Transmitted herewith is an amendment in the above-entitled application.

The fee has been calculated as shown below.

	(Col. 1) Claims Remaining After Amendment	(Col. 2) Minus	(Col. 3) Highest Previously Paid for	(Col. 4) Present Extra	SMALL ENTITY		OTHER THAN SMALL ENTITY	
					RATE	FEE	RATE	FEE
TOTAL CLAIMS	* 24	—	** 24	0	x 11 =	\$0	x 22 =	\$0
INDEP CLAIMS	* 4	—	4	0	x 41 =	\$0	x 82 =	\$0
[] Multiple Dependent Claim Presented and Fee Not Previously Paid					+ 135 =	\$0	+ 270 =	\$0
*If the entry in Col. 1 is less than the entry in Col. 3, type "0" in Col. 4. **If the "Highest Number Previously Paid For" in this space is less than 20, type "20" in this space.					TOTAL	\$0	TOTAL	\$0

___ No additional fee is required.

___ Our Check No. _____ in the amount of \$_____ is enclosed.

X Please charge any additional fees, including extension fees, or credit any overpayment to Deposit Account No. 06-1300 (Order No. A-62629/RFT/RMS). A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Robin M. Silva

Robin M. Silva

Registration No. 38,304

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